



San Francisco Residential Rent Stabilization and Arbitration Board

MEMORANDUM

Your appeal on the basis of financial hardship must be accompanied by the attached "Landlord Hardship Application." The information contained in this form will provide the Rent Board Commissioners with a basis for deciding whether or not to grant your appeal.

It is not necessary for you to prove the amounts that you list on the Hardship Application form at this time. However, should the Commissioners accept your appeal and remand the case for a hearing, you will be required to submit documentation proving the veracity of the income, assets, resources and debts that you claim. Landlords should be aware that the Commissioners will be looking at your **total financial picture**, not just the income generated by the building at issue in this case.

Please note that while a landlord may seek relief from the decision of an Administrative Law Judge based on financial hardship, a landlord's financial hardship is not a separate ground for a rent increase under the Rent Ordinance.

If you have any questions, please contact our counseling line at 415.252.4600.

Attached: Landlord Hardship Application

San Francisco Residential Rent Stabilization and Arbitration Board

INSTRUCTIONS FOR COMPLETING HARDSHIP APPEAL

(1) If the landlord bases an appeal on grounds of financial hardship, the landlord must complete the attached Hardship Application. If the appeal is accepted for hearing, the landlord will be required to submit documentation proving the veracity of the claimed income, assets, resources and debts. The Administrative Law Judge will be looking at the **landlord's total financial picture, not just the income generated by the building at issue in this case.**

(2) Please complete a separate Landlord Hardship Application form for each owner of the subject property.

Rent Board Date Stamp

LANDLORD HARDSHIP APPEAL

↓Property Information↓

Full Property Address _____ San Francisco, CA 941 _____ Zip Code

Date Building Constructed _____ # of Units in Building _____ Case Number of Decision Being Appealed _____

↓Owner Information↓

First Name _____ Middle Initial _____ Last Name _____

Mailing Address: Street Number _____ Street Name _____ Unit Number _____ City _____ State _____ Zip Code _____

Primary Phone Number _____ Email Address _____

↓Owner Information↓

First Name _____ Middle Initial _____ Last Name _____

Mailing Address: Street Number _____ Street Name _____ Unit Number _____ City _____ State _____ Zip Code _____

Primary Phone Number _____ Email Address _____

If someone other than the owner is authorized to represent the owner's interests in this petition, please fill out the applicable information below. Non-attorney representatives must attach written authorization to represent the owner.

↓Landlord Representative Information (if applicable) ↓ Attorney Non-attorney Representative

First Name _____ Middle Initial _____ Last Name _____

Mailing Address: Street Number _____ Street Name _____ Unit Number _____ City _____ State _____ Zip Code _____

Primary Phone Number _____ Email Address _____

ADDITIONAL INFORMATION REQUIRED ON NEXT PAGE

San Francisco Residential Rent Stabilization and Arbitration Board

LANDLORD HARDSHIP APPEAL

List every tenant who may be affected by this Hardship Appeal. If more than 3 tenants, attach additional page with contact information for all other tenants. Also list any attorney or representative of such tenant(s).

↓Tenant Information↓

First Name Middle Initial Last Name

Mailing Address: Street Number Street Name Unit Number City State Zip Code
(if different from unit address)

Primary Phone Number Email Address

↓Tenant Information↓

First Name Middle Initial Last Name

Mailing Address: Street Number Street Name Unit Number City State Zip Code
(if different from unit address)

Primary Phone Number Email Address

↓Tenant Information↓

First Name Middle Initial Last Name

Mailing Address: Street Number Street Name Unit Number City State Zip Code
(if different from unit address)

Primary Phone Number Email Address

↓Tenant Representative Information (if applicable)↓ Attorney Non-attorney Representative

First Name Middle Initial Last Name

Mailing Address: Street Number Street Name Unit Number City State Zip Code

Primary Phone Number Email Address

San Francisco Residential Rent Stabilization and Arbitration Board

LANDLORD HARDSHIP APPLICATION

Every owner of the property must complete a separate Hardship Application.

(The Rent Board will be looking at your total financial picture, not just the income and expenses for the building at issue in this case. Please submit documentation proving the veracity of the income, expenses, assets and liabilities that you claim below.)

There must be an entry for every line on this page, even if the amount entered is zero (0).

Income/Expense Summary for Current Year

Monthly Income

Salary (gross)
Annual Bonus
Interest Income
Social Security
Rental Income
Pension Payments
Alimony/Child Support
Dividends
Unemployment Comp.
Worker's Compensation
Other Income:
Total Income: \$

Monthly Expenses (total for all properties you own)

Debt Service (Mortgage)
Property Taxes
Utilities
Repairs/Maintenance
Business License/Fees
Fire/Theft Insurance
Transportation
Alimony/Child Support
Medical Insurance
Medical Bills
Entertainment
Food
Automobile Loan/Insurance
Loan Payments (specify)
Total Expenses: \$

Total Gross Income in Prior Two Calendar Years:

20__: \$ 20__: \$

Current Assets and Liabilities

Assets

Checking
Savings
Time Deposits
Stocks Total
Bonds Total
Real Property (list address)
1.
2.
3.

State Value Below

Debts and Liabilities

Short Term Debt (outstanding balance):
Credit Cards
Credit Lines
Personal Loans
Long Term Debt (outstanding balance):
Mortgages
Car Loans
Student Loans
Medical Bills

Total All Assets: \$

Total All Debts: \$

Hardship Information

Number and Age(s) of Dependents

Briefly state the reason for hardship (e.g. fixed income, illness, inability to work, large medical bills, etc.)

Average # of Hours Worked/Week

Briefly state the type of relief sought (e.g. repayment plan, reduction of payment, other)

Declaration of Landlord Petitioner

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THIS INFORMATION AND EVERY ATTACHED DOCUMENT, STATEMENT AND FORM IS TRUE AND CORRECT.

(Print Name)

(Signature of Owner or Authorized Representative) (circle one)

(Date)